## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	702		8.30.00
O.I.P.E. CLASSIFIER	<u> </u>		9/3/00
FORMALITY REVIEW	#\$.	545	10.5.00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

•	Rejected	N	Non-elected
=	Allowed	1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

	•	÷	Sanceled Restricted	0	Objected
BEST AVAILABLE CUP	Claim Date Claim Date		Claim	Date	
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If more than 150 claims or 10 actions staple additional sheet here

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